

STATE OF NEVADA  
DEPARTMENT OF PERSONNEL

**REQUEST TO ACCELERATE SALARY**  
(Adjustment of Steps Within Same Pay Grade - NAC 284.204)

Org. No.:	Department:	Division:
Position Control #:	Geographic Location of Position:	
Applicant / Employee Name:		
Class Title:	Class Code:	
Grade:	Proposed Step:	Proposed Effective Date:

**BASIS OF REQUEST:** (Items listed below are abbreviated. Read NAC 284.204 for qualifying conditions.)

- ☐ Meet difficult recruitment problem:
- ☐ Recruitment produced less than 5 eligible persons who are available; OR
  - ☐ Recruitment deemed historically difficult.
- ☐ Hire person with superior qualifications.
- ☐ Maintain an equitable relationship between employees for reasons other than seniority.

**JUSTIFICATION:** (Required for approval. Be specific and attach additional sheet(s) if necessary.)

<p style="text-align: center;"><b>APPOINTING AUTHORITY CERTIFICATION:</b></p> <p><i>I Certify That I Have:</i></p> <ul style="list-style-type: none"><li>Considered the salary requirements and qualifications of all eligible persons.</li><li>Ensured that the adjustment is financially feasible.</li><li>Ensured that the adjustment will not cause an inequity with other employees.</li><li>Maintained accurate records on this request.</li></ul> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div>_____ SIGNATURE</div><div>_____ DATE</div></div>	<p style="text-align: center;"><b>FOR COMPLETION BY DEPARTMENT OF PERSONNEL</b></p> <p><input type="checkbox"/> <b>APPROVED</b> Effective Date _____</p> <p><input type="checkbox"/> <b>DISAPPROVED</b></p> <p>Per NAC 284.204, Subsection _____</p> <p>Request no. _____</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div>_____ SIGNATURE</div><div>_____ DATE</div></div>
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**ATTACH A COPY OF APPROVED DOCUMENT TO PAYROLL FORM (ESMT-A)**